

The State of New Hampshire

_____ COUNTY

PROBATE COURT

IN RE: _____

DOCKET NUMBER: _____

APPOINTMENT OF RESIDENT AGENT

1. Fiduciary Name _____ Telephone _____
Mailing Address _____

2. Deceased/Ward Name _____
Residence (city or town) _____

3. Fiduciary is: Executor Administrator
 Ancillary Executor or Administrator Special Administrator
 Administrator With Will Annexed Administrator De Bonis Non
 Guardian Conservator Trustee

4. I hereby appoint _____ as my agent to receive notice
of claims against the estate of the deceased/ward, and service of process against me as
fiduciary.

Resident agent mailing address _____

Resident agent telephone number _____

Date: _____

Fiduciary Signature

I accept appointment as resident agent.

Date: _____

Resident Agent Signature